

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Winchester, Richard M.  
Filed: Simultaneously Herewith  
Serial No.: N/A  
For: Construction Layout Stripping

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

**OATH AND POWER OF ATTORNEY  
ORIGINAL APPLICATION**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled Construction Layout Stripping, the specification of which —

(check one) ☒ is attached hereto.  
☐ was filed on \_\_\_\_\_ (Date)  
as Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

**Power of Attorney:** As a named inventor, I hereby appoint the following attorney to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

DIRECT TELEPHONE CALLS TO:  
(name and number)  
Ed White  
405/810-8188

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the ~~validity of the application~~ or any patent issuing thereon.

SIGNATURE OF INVENTOR 202:

6/29/99

DATE:

State of \_\_\_\_\_ )  
 ) ss  
County of \_\_\_\_\_ )

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_; 19\_\_\_\_

(signature of notary or officer)

(SEAL)

(official character)